

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 14 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S38530** (9)  
1. Corporation Name  
**E AND E COUNTRYSIDE, INC.**

Principal Place of Business <b>1831 N. BELCHER RD. A-3 CLEARWATER FL 34625</b>	Mailing Address <b>1831 N. BELCHER RD. A-3 CLEARWATER FL 34625-1417</b>
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2. Principal Place of Business 21 <b>3131 N. McMullen Booth Rd</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>same</b> Suite, Apt. #, etc.
City & State 23 <b>Clearwater FL</b> Zip 24 <b>34621</b> Country 25 <b>USA</b>	City & State 28 <b>same</b> Zip 29 <b>same</b> Country 30 <b>same</b>

3. Date Incorporated or Qualified <b>03/18/1991</b>	3a. Date of Last Report <b>01/19/1996</b>
4. FEI Number <b>59-2698727</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**STECKLER, ERIC A  
1831 BELCHER RD. N.  
A-3  
CLEARWATER FL 34625**

10. Name and Address of New Registered Agent
81 Name <b>ERIC A STECKLER</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>3131 N. McMullen Booth Rd</b>
83
84 City <b>Clearwater</b> FL 85 Zip Code <b>34621</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Eric Steckler* DATE: **4/29/97**  
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	<b>STECKLER, ERIC A</b>
STREET ADDRESS	<b>1831 N. BELCHER RD. STE. A-3</b>
CITY-ST-ZIP	<b>CLEARWATER FL 34625</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>Eric Steckler</b>
1.3 STREET ADDRESS	<b>3131 N. McMullen Booth Rd</b>
1.4 CITY-ST-ZIP	<b>3131 Clearwater FL 34621</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee appointed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Eric Steckler* DATE: **4/29/97** 726-8871  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)